



AMERICAN  
COLLEGE of  
CARDIOLOGY®

# LEGISLATIVE CONFERENCE

## TALKING POINTS

### INCREASING PATIENT ACCESS TO CARE

#### **TOPIC: ADDRESSING MEDICARE CUTS**

##### **Your "Ask":**

- Prevent the array of substantial, disruptive payment cuts to health care professionals set to take effect on Jan. 1, 2023.
- **HOUSE:** Co-sponsor or thank member for co-sponsoring (if applicable) the ***Supporting Medicare Providers Act of 2022*** (H.R. 8800) which would provide an additional 4.42% to the conversion factor to avoid payment cuts associated with budget neutrality adjustments resulting from Medicare policy changes. Importantly, this legislation also provides an opening for Congress to address systemic issues through long-term reform.
- **SENATE:** Sign the Stabenow/Barrasso letter that asks Senate leadership to address these imminent cuts and implement bipartisan, long-term payment reforms to Medicare.

##### **Points to Make:**

- Reductions to Medicare payments for physician work exacerbate financial instability for clinicians and health systems and further threaten patient care. ACC will continue to explore solutions and participate at every opportunity available as we work with Congress and the Administration to develop long-term reform concepts.
- However, immediate action is needed to mitigate already enacted and detrimental looming cuts. We encourage Congress to:
  - Contact CMS to ask that they mitigate the steep and disruptive reduction proposed for electrophysiology codes.
  - Pass legislation to waive the statutory 4% Medicare payment reduction due to PAYGO.
  - Pass the ***Supporting Medicare Providers Act of 2022*** (H.R. 8800), which would authorize a 4.42% temporary increase to the Medicare Physician Fee Schedule conversion factor to avoid cuts associated with budget neutrality.
  - Continue to hold hearings and roundtables to explore and highlight the need for systemic reform, and partner with the ACC to develop long term solutions that secure the future of our health care system and our clinician workforce.



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## TOPIC: EXPANDING PATIENT ACCESS TO CARDIOVASCULAR CARE

### Your "Ask":

- **HOUSE:** Co-sponsor or thank member for co-sponsoring (if applicable) the ***Increasing Access to Quality Cardiac Rehabilitation Care Act of 2021*** (H.R. 1956), which would authorize PAs, NPs, and CNSs, referred to as advanced practice providers (APPs), to begin supervising patients' day-to-day CR/PR in 2023 – rather than 2024 (current law), and authorize APPs to order and refer patients for cardiac and pulmonary rehabilitation under Medicare.
- **SENATE:** Co-sponsor or thank member for co-sponsoring (if applicable) the ***Increasing Access to Quality Cardiac Rehabilitation Care Act of 2021*** (S. 1986), which would authorize PAs, NPs, and CNSs, referred to as advanced practice providers (APPs), to begin supervising patients' day-to-day CR/PR in 2023 – rather than 2024 (current law), and authorize APPs to order and refer patients for cardiac and pulmonary rehabilitation under Medicare.

### Points to Make:

- Previous legislation, included in the ***Bipartisan Budget Act of 2018***, allows APPs to supervise these services starting in 2024. H.R. 1956/S. 1986 would move the target year to 2023.

## IMPROVING CLINICIAN WELL-BEING

## TOPIC: STREAMLINING PRIOR AUTHORIZATION PRACTICES

### Your "Ask":

- **HOUSE:** Thank your member for co-sponsoring (if applicable) the ***Improving Seniors' Timely Access to Care Act of 2021*** (H.R. 3173), which passed in the House in September and would address prior authorization barriers that create clinician administrative burden and detract from patient care.
- **SENATE:** Co-sponsor or thank member for co-sponsoring (if applicable) the ***Improving Seniors' Timely Access to Care Act of 2021*** (S. 3018), which would address prior authorization barriers that create clinician administrative burden and detract from patient care.

### Points to Make:

- As a next step to addressing prior authorization, ACC encourages Congress to support the ***GOLD CARD Act*** (H.R. 7995), which would allow clinicians that have a history of meeting prior authorization requirements to be exempt from those requirements for a specified period of time.

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## TOPIC: ADDRESSING WORKPLACE VIOLENCE

### Your "Ask":

- **HOUSE:** Co-sponsor or thank member for co-sponsoring (if applicable) the **Safety from Violence for Healthcare Employees** (SAVE) Act (H.R. 7961), which would create federal penalties for those that knowingly commit violence or intimidation against health care workers, for which no federal law currently exists.
- **SENATE:** While there is no Senate companion to this legislation yet, we encourage you to share your story related to the topic and stress the importance of federal protections for health care workers.

### Points to Make:

- According to a 2020 Bureau of Labor Statistics report, the health care and social service industries experienced the highest rates of injuries caused by workplace violence and were five times more likely to experience workplace violence.
- The penalties outlined within H.R. 7961 are similar to those established to protect airline workers.

## DEVELOPING PUBLIC HEALTH INITIATIVES

## TOPIC: SOUTH ASIAN HEART HEALTH AWARENESS & RESEARCH

### Your "Ask":

- **HOUSE:** Thank member (if applicable) for supporting the **South Asian Heart Health Awareness & Research Act of 2022** (H.R. 3771), which would fund heart disease research and address health equity through authorization of \$10 million over four years to CDC and NIH.
- **SENATE:** Ask Congress to pass the **South Asian Heart Health Awareness & Research Act** (H.R. 3771), which was referred to the Senate Health, Education, Labor and Pensions Committee to fund heart disease research and address health equity through authorization of \$10 million over four years to CDC and NIH.

### Points to Make:

- While heart disease is a leading cause of death for most racial and ethnic groups in the U.S., the South Asian community has a risk of heart disease that is four times higher than the general population. The legislation also gives HHS discretion to utilize funds to promote awareness in other communities and populations disproportionately affected by heart disease.

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## TOPIC: VALVULAR HEART DISEASE RESEARCH

### Your "Ask":

- **HOUSE:** Thank your member for co-sponsoring (if applicable) the ***Cardiovascular Advances in Research and Opportunities Legacy Act*** (H.R. 1193), which would support valvular heart disease research and disease awareness.
- **SENATE:** Co-sponsor or thank member for co-sponsoring (if applicable) the ***Cardiovascular Advances in Research and Opportunities Legacy Act*** (S.1133), which would support heart valvular heart disease research and disease awareness.
  - Directs the National Heart, Lung, and Blood Institute to administer grants for conducting research on valvular heart disease.
  - Instructs the Centers for Disease Control and Prevention to increase public awareness regarding symptoms of valvular heart disease and effective strategies for preventing sudden cardiac death

### Points to Make:

- Currently, there is no heart valve disease screening recommendation from the U.S. Preventive Services Task Force nor screening as part of the "Welcome to Medicare" preventive or yearly "Wellness" visit, despite more than 5 million individuals diagnosed with valvular heart disease each year and more than 935,000 Americans experiencing a heart attack each year.